

**Trauma System Advisory Committee**  
**3760 South Highland Drive Salt Lake City, UT 84106**  
**5<sup>th</sup> Floor Board Room**  
**Meeting Minutes**  
**Monday, June 23, 2014**

<b>Committee Members:</b>	Don Vanboerum, MD, Holly Burke, RN, Nancy Chartier, RN, Hilary Hewes, MD, Marc Sanderson, Deanna Wolfe, RN, Karen Glauser, RN and Mark Thompson
<b>Excused:</b>	Craig Cook, MD, Mark Dalley, Jason Larson, MD, Stephen Morris, MD
<b>Guests:</b>	Grant Barraclough, Janet Cortez, Ben Anderson, Tim Norris, Kris Hansen
<b>Staff:</b>	Shari Hunsaker, Mathew Christensen and Suzanne Barton
<b>Presiding:</b>	Bob Jex

<b>Agenda Topic</b>	<b>Discussion</b>	<b>Action</b>
	<b><u>Welcome</u></b>	
<b>Welcome and Introduction of Members</b>	Bob Jex welcomed the committee to the meeting and acknowledged guests present and introduced new TSAC members that will replace Deanna Wolfe with Grant Barraclough and replacing Nancy Chartier with Janet Cortez.	
	<b><u>Action Items:</u></b>	
<b>Approval of June 23, 2014 Meeting Minutes</b>	The March 24, 2014 Trauma System Advisory Committee meeting minutes were reviewed and approved by the Committee.	<b>Deanna Wolfe motioned to approve the March 24, 2014 meeting minutes. Karen Glauser seconded the motion. All present members voted in favor of the motion. No one opposed; none abstained. Motion carried.</b>
<b>SST Report</b>	Bob Jex reported on the SST meeting and said the Bureau has a desire to put the trauma services in to regions. The SST Region includes Salt Lake, Tooele and Summit Counties. The goal is to have the regions mirror for functional purposes on the designation process. All trauma directors that were designated were invited to the meeting. Dr. Don VanBoerum, who was in attendance at the meeting, talked about the designation process and that presently there was no need for additional Level I or II trauma centers in the SST region. It would be appropriate for any additional hospital seeking designation should be designated as Level III or IV trauma centers. Deanna Wolfe made comments about the fact that the COT only meets once a year and is not engaged enough committee to make a decision for the state. Bob commented the last COT meeting was held in January or February and the recommendation was made that if the COT was functioning properly, it would involve more surgeons and he suggested that when a hospital is designated as a trauma center, then their medical director automatically becomes part of the COT. Deanna also commented that she would like to see a year of committed activity before they were allowed to make a big decision like this. Bob commented that	

	<p>the decision is not theirs; it is the states and the Trauma Committee. Another discussion that came out of the SST meeting was pre-hospital criteria where patients are taken. Bob mentioned that the state has adopted the CD Field Triage guidelines. It is their intention to get the guidelines adopted in the urban areas and the next step would be to meet with the administrators and EMS and look at multiple transfers and the appropriateness of the present designation levels.</p>	
	<b><u>Informational Items:</u></b>	
<b>Data Report</b>	<p>At the last EMS Meeting in March triage and trauma of trauma patients was discussed. To that end, Mathew presented a slide presentation showing step 1 and step 2 field triage of injured patients and triage destination trends for step 1 trauma patients transported from the field by ground ambulance. 76% of the Utah population resides in four counties along with three Level 1 centers and three Level 2 centers. Slides displayed the different regions of the state and indicated data from 2011 when ambulances transported the most injured patients to meet the CDC Field Triage Step 1 Guidelines. Utah's triage patterns are:</p> <ul style="list-style-type: none"> <li>• Levels 1 and 2 received 60% statewide</li> <li>• 85% in SST level 1 centers</li> <li>• 61% and 64% level 2 centers</li> <li>• Four rural regions with one level 3, two level 4 and one level 5</li> </ul> <p><b>What should expectations/goals be for step 1 triage?</b></p> <p>Moving toward setting triage targets:</p> <ul style="list-style-type: none"> <li>• Which trauma centers in each region should get how many step 1 patients?</li> <li>• Each region has unique circumstances.</li> <li>• Statewide triage goals for step 1 patients?</li> <li>• Destinations and percent?</li> </ul> <p>Pre-hospital data totals for EMS step 1 triage destinations statewide showed that about 45% were taken to levels 1 or 2. Comparison to the trauma registry, about 60% of step 1 patients were delivered to levels 1 or 2 in recent years.</p> <p>There was discussion about pre-hospital data from the Polaris System in regards to where the patient is in relation to the population and where the injury occurs. This information can be looked at per case and can be valuable.</p>	
<b>Receiving Facility Rule (Draft)</b>	<p>The draft rule for Patient Receiving Facilities was passed out. In some of the rural areas, we have clinics with no hospitals in the county. They are traditionally been receiving some ambulance transports. Green River Clinic made a formal request to have ambulances transport patients to their site. Representatives from EMS met with them the first of the month and EMS rule regarding patient destination was discussed. It was stated that until EMS develops rule for Receiving Facilities, current destination protocols need to be followed. It</p>	

	<p>was stated that rule will be developed for destinations other than licensed hospitals. This draft form will be presented to the EMS Committee for approval. Would like input from the TSAC Committee as well. The gist of this issue was if an ambulance is going to a non-hospital clinic there needs to be minimum criteria established for that clinic receiving patients with equipment and training. These clinics need to be affiliated with a resource hospital or a designated trauma center so that EMS agencies transfer patients under the direction of medical control. The medical control will be from a resource hospital or trauma center. This will include freestanding ED's as well.</p>	
<b>Trauma Center Applications - Designations</b>	<p>This year we have 8 trauma centers up for re-designation. McKay Dee and Ogden Regional just hosted the ACS Verification for their facilities last week and they did extremely well. Utah Valley will host their Focus visit on September 12<sup>th</sup>. American Fork, Moab, Mountain View and Timpanogos will be this year as well. They are the only ones still remaining and just finished the re-designation visit with Cache Valley, <del>and Logan</del>. Received an application from Lakeview for designation and 4 others we will be looking at this year which are Jordan Valley, Heber Valley Delta and Sanpete for designation.</p> <p>When a hospital becomes designated they are responsible for performing all their data entry for the trauma registry. If these 4 facilities are successful this year with their designations, we will have 24 designated centers in the state. We are well over halfway point for the hospitals to be designated.</p>	
<b>PI Seminars - date</b>	<p>Holly Burke will be traveling to 2 – 3 regions within the state and is having performance issue discussions and systems with EMS and the hospitals. We have them scheduled for July 2<sup>nd</sup> in Roosevelt for the Southeast region, July 8<sup>th</sup> in Gunnison for the Central Region and the SST region will be August 5<sup>th</sup> at the LDS Hospital for PI Seminars.</p>	
<b>Recognition</b>	<p>Three retiring members of TSAC were recognized and given plaques in appreciation for their services. They are Nancy Chartier, Deanna Wolfe and Dr. Stephen Morris, who was not able to make the meeting today. They have served the committee very well and we wanted to recognize them and give our heart-felt gratitude for their service they have rendered. Thank you given to Bob Jex as well for his service to trauma.</p>	
<b>End of Meeting</b>	<p>Next meeting is scheduled for Monday, September 22, 2014 from 1:00-3:00 p.m. at the Highland Building, 5<sup>th</sup> Floor Boardroom.</p>	<b>Meeting Adjourned</b>